FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
INIFORM LIMITED OFFERING EXEMPTION

OMB APP	PROVAL		
OMB NUMBER:	3235-0076		
Expires:	May 31, 2002		
Estimated average burden			
hours per response 16.00			

SEC USE ONLY

Serial

FINANCIAL

Prefix

Delaware

	UNIFORM LIMITED OFFERING EXEMPTION	ON DATE RECEIVED
Name of Offering (check if this is an PowerOneData, Inc.	amendment and name has changed, and indicate change.)	DECEN
Filing Under (Check box(es) that apply:	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ S	Section 4(6) DESE
Type of Filing: New Filing	ndment	MAN C. LOUNG
	A. BASIC IDENTIFICATION DATA	100F-01 11 7.150K
1. Enter the information requested about	the issuer	188
Name of Issuer (check if this is an am <u>PowerOneData</u> , Inc.	endment and name has changed, and indicate change.)	
Address of Executive Offices 2600 N. Central Ave., Suite 175	(Number and Street, City, State, Zip Code) 50, Phoenix, AZ 85012	Telephone Number (Including Area Code) 602-735-2665
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		PROCESSI
	ng alternative meter reading solutions for the energy utilit	y industry MAY 2 1 200
Type of Business Organization		• • • • • • • • • • • • • • • • • • • •
•		ease specify): limited liability company THOMSON
☐ business trust ☐	limited partnership, to be formed	71101110111

Month

03

Year

00

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Ernest Villicana Business or Residence Address (Number and Street, City, State, Zip Code) 2600 North Central Ave... Suite 1750, Phoenix, AZ 85012, Check Box(es) that Apply: A Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 2600 North Central Ave., Suite 1750, Phoenix, AZ 85012 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Phelps Dodge Corporation Business or Residence Address (Number and Street, City, State, Zip Code) One North Central Avenue, Phoenix, Arizona 85004 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Ganesh Moorthy Business or Residence Address (Number and Street, City, State, Zip Code) 2600 North Central Avenue, Ste. 1750, Phoenix, Arizona 85012 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Charles Bayless Business or Residence Address (Number and Street, City, State, Zip Code) 7300 N. Sunset Canyon Dr., Tucson, Arizona 85718 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INFOI	RMATION	ABOUT (OFFERING	ý				
1. Ha	as the issuer s	old, or does	the issuer	intend to se	ell, to non-a	ccredited in	vestors in t	his offering	:?			Yes	No
			Answ	er also in A	Appendix, C	olumn 2, if	filing unde	er ULOE.					
2. W	hat is the mir	nimum inves	stment that	will be acc	epted from	any individ	ual?			•••••	•••••		0.000
3. Do	oes the offerin	ng permit jo	int ownersh	nip of a sing	gle unit?				•••••	•••••		Yes	No
sir an br	nter the informilar remuner associated poker or deale information	ration for so erson or ag r. If more t	olicitation of ent or a br than five (5	f purchaser oker or dea) persons t	s in connec aler register	tion with sared with the	ales of secu e SEC and	rities in the or with a s	offering. It tate or state	f a person to es, list the	o be listed i	s e	
Full Name	(Last name fi	rst, if indiv	idual)	<u>.,</u>						·			
Pittma Business or	nn, Sam r Residence A	Address (Nu	umber and S	Street, City	, State, Zip	Code)							
	N. Scottsdal ssociated Bro			zona 8525	4								
Arizo	na Capital Gr	oup, Inc.						<u> </u>					
States in w	hich Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers							
(Chec	k "All States'	or check ir	ndividual Si	tates)		•••••				•••••			States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] レ [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [MV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [M([PA [PR	.] .]
Full Name	(Last name fi	irst, if indiv	idual)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Rusiness	r Residence A	Address (Ni	ımber and S	Street City	State Zin	Code				****			
Dusiness (r Residence 7	1001035 (140	amoer and .	ourcei, City	, State, Zip	code)							
Name of A	ssociated Bro	ker or Deal	ler										
States in w	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers				<u> </u>			****
(Check "Al	ll States" or c	heck indivi	dual States)				*************				••••••	□ All	States
[AL] [IL] [MT] [RI]	[AK] [JN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M]] [OH] [MV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [M([PA [PR) []
Full Name	(Last name f	irst, if indiv	idual)										
Business o	r Residence A	Address (N	umber and	Street, City	, State, Zip	Code)							
Name of A	ssociated Bro	oker or Deal	ler								·		
States in w	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers							
(Check "A	ll States" or c	heck indivi	dual States))	•••••	***************************************		•••••			•••••	□ All	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [MV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MG [PA [PR) [)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer in "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security Debt Equity..... \$2,500,000_ \$50,000____ Convertible Securities (including warrants)..... Partnership Interests.... Other (Specify) \$<u>50,0</u>00 \$2,500,000 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors \$ 50,000 Accredited Investors 1 N/A N/A Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Dollar Amount Type of Security Sold Type of offering Rule 505..... Regulation A Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$1,600 Printing and Engraving Costs.... Legal Fees \boxtimes \$40,000 Accounting Fees..... 冈 \$12,000___ Engineering Fees.... П \$300,000_ Sales Commissions (specify finders' fees separately) Other Expenses (identify)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total

\$353,600

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND	USE OF PROCEE	OS .
_	b. Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference the "adjusted gross proceeds to the issuer."	ce is		\$2,146.400
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to used for each of the purposes shown. If the amount for any purpose is not known, furnish estimate and check the box to the left of the estimate. The total of the payments listed must enthe adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.	h an qual		
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees.	C	\$	\$15,000
	Purchase of real estate	D	\$	□ \$
	Purchase, rental or leasing and installation of machinery and equipment	C	\$	_ \ \$
	Construction or leasing of plant buildings and facilities	D	\$	_ □ \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	O	\$	_ [\$
	Repayment of indebtedness	IJ	\$	□ \$
	Working capital	\boxtimes	\$411,400	© \$1.500,000_
	Other (specify): Sales and marketing	Ę.	\$	_
		Ü	\$	_ 6 \$
	Column Totals	\boxtimes	\$415,000	\$1,745,000
	Total Payments Listed (column totals added)		⋈ \$ <u>2,1</u>	46,400
_	D. FEDERAL SIGNATURE			
sig	ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. Institutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	e Con	mission, upon writte	
	Suer (Print or Type) PowerOneData, Inc.	ai	Da Y	te 4-02
Na	Ernest Villicana Title of Signer (Print or Type) Chief Executive Officer			

_ ATTENTION_

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE					
j.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes of such rule?					
	See Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.					
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.					
4.	The undersigned issuer represents that the issuer if familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.					
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned y authorized person.					
Issi	Date (Print or Type) Signature V. 2 × 5 (2) ?					
Na	PowerOneData,Inc. me (Print or Type) Title (Print or Type)					
	Ernest Villicana Chief Executive Officer					

Instruction:
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	2	3			4			5
	Intend to non-ac investors (Part B-	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and Amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		X	Series B Preferred Stock / \$2,500,000	1	\$50,000	0	0		Х
AR									
CA									
СО									
СТ							****		
DE				,			•		
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО							A contact to the sale to the s		

APPENDIX

1	2	2	3		4	4			5	
	Intend to non-ac investors (Part B-	ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of in Amount purc (Part C	pe of investor and int purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
	, and the second			Number of		Number of		,		
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
МТ										
NE										
NV										
NH	*									
NJ										
NM										
NY										
NC										
ND										
ОН							,			
ОК										
OR				-						
PA										
RI				.						
SC										
SD										
TN										
TX								_		
UT							¥			
VT										
VA										
WA										
wv										
WI										
WY										
PR										

Form U-2 Uniform Consent to Service of Process

Know all men by these presents:

POWERONEDATA, INC. That the undersigned _ or (an individual), [strike out laws of DELAWARE inapplicable nomenclature] for purposes of complying with the laws of the States indicated hereunder relating to either the registration or sale of securities, hereby irrevocably appoints the officers of the States so designated hereunder and their successors in such offices, its attorney those States so designated upon whom may be served any notice, process or pleading in any action or proceeding against it arising out of, or in connection with, the sale of securities or out of violation of the aforesaid laws of the States so designated; and the undersigned does hereby consent that any such action or proceeding against it may be commenced in any court of competent jurisdiction and proper venue within the States so designated hereunder by service of process upon the officers so designated with the same effect as if the undersigned was organized or created under the laws of that State and have been served lawfully with process in that State.

It is requested that a copy of any notice, process or pleading served hereunder be mailed to:

MICHAEL D. HOOL AT R & T CORPORATE SERVICES, LLC

(Name)

2425 E. Camelback Rd., Ste. 850, Phoenix, AZ 85016

(Address)

Place an "X" before the name of all the States for which the person executing this form is appointing the designated Officer or that State as its attorney in that State for receipt of service of process:

ALABAMA	Secretary of State	FLORIDA	Department of Banking and Finance
ALASKA	Administrator of the Division of Banking and Corporations, Department of Commerce and Economic Development	GEORGIA	Commissioner of Securities
X ARIZONA	The Corporation Commission	GUAM	Administrator, Department of Finance

ARKANSAS	The Securities Commissioner	IIAWAH	Commissioner of Securities
CALIFORNIA	Commissioner of Corporations	IDAHO	Director, Department of Finance
COLORADO	Securities Commissioner	ILLINOIS	Secretary of State
CONNECTICUT	Banking Commissioner	INDIANA	Secretary of State
DELAWARE	Securities Commissioner	AWOI	Commissioner of Insurance
DISTRICT OF COLUMBIA	Public Service Commission	KANSAS	Secretary of State
KENTUCKY	Director, Division of Securities	OHIO	Secretary of State
LOUISIANA	Commissioner of Securities	OREGON	Director, Department of Insurance and Finance
MAINE	Administrator, Securities Division	OKLAHOMA	Securities Administrator
MARYLAND	Commissioner of the Division of Securities	PENNSYLVANIA	Pennsylvania does not require filing of a Consent to Service of Process
MASSACHUSETTS	Secretary of State	PUERTO RICO	Commissioner of Financial
			Institutions
	Administrator, Corporation		
MICHIGAN	and Securities	RHODE ISLAND	Director of Business
	Bureau, Department of Commerce		Regulation
MINNESOTA	Commissioner of Commerce	SOUTH CAROLINA	Securities Commissioner

-	CEO/Pr Tit	esident le	
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(SEAL)		7 5 100	
May	. x9x x x 20 ()2	~
Dated this	> _	day of	
	Commissioner Ord		
NORTH DAKOTA	Securities		
			_ 0000
NORTH CAROLINA	Secretary of State	WYOMING	Secretary of State
			·
NEW YORK	Secretary of State	WISCONSIN	Commissioner of Securities
NEW MEXICO	Director, Securities Division	WEST VIRGINIA	Commissioner of Securities
NEW JERSEY	Chief, Securities Bureau	WASHINGTON	Director of the Department Licensing
	State		Commission
NEW HAMPSHIRE	Secretary of	VIRGINIA	Clerk, State Corporation
NEVADA	Secretary of State	VERMONT	Secretary of State
NEBRASKA	Director of Banking and Finance	UTAH	Director, Division of Securities
MONTANA	State Auditor and Commissioner of Insurance	TEXAS	Securities Commissioner
	Commissioner		and Insurance
MISSOURI	Securities	TENNESSEE	Commissioner of Commerce
	State		of Securities
MISSISSIPPI	Secretary of	SOUTH DAKOTA	Director of the Division

CORPORATE ACKNOWLEDGMENT

State or Province of ARIZONA)
County of Maricopa) ss. On this 3 ^{po} day of May , xxxx before me
undersigned officer, personally appeared <u>Ernest Villi Cana</u> known personally to me to be the <u>PRESIDENT</u> of the above named corporation and
(Title)
acknowledged that he, as an officer being authorized so to do, executed the foregoing instrument for
the purposes therein contained, by signing the name of the corporation by himself as an officer.
IN WITNESS WHEREOF I have hereunto set my hand and official seal. • Wisabah C-Jukblener
OFFICIAL SEAL ELISABETH C. FINKBEINER Notary Public/Commissioner of Oath Notary Public/Commissioner of Oath My Commission Expires Local 29th 2004 My Comm. Expires Dec. 29, 2004

INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT

State or Province of Ari Zona)	
County of Maricopa) ss.	
On this Zes day of May	, <u>1002</u> , before me

the undersigned officer, personally appeared Ernest Villicana to me personally known and known to me to be the same person(s) whose name(s) is (are) signed to the foregoing instrument, and acknowledged the execution thereof for the used and purposed therein set forth.

In WITNESS WHEREOF I have hereunto set my hand and official seal.

Notary Public/Commissioner of Oaths

My Commission Expires WeC.o

ELISABETH C. FINKBEINER

Notary Public - State of Arizona

MARICOPA COUNTY

My Comm. Expires Dec. 29, 2004